FILE NOW: FILING FEE AFTER MAY 1 IS \$550

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT 'ATE

Sandra B. Morth

Secretary of Stat DIVISION OF CORPORTS

DOCUMENT # V10467

(1)

FALOH CONSTRUCTION CORPORATION

Principal Place of Business

Mailing Address

FILED May 08 1997 8:00an Secretary of State



704 VIRGINIA LANE APOPKA FL 32703		704 VIRGINIA LANE APOPKA FL 32703-6050			
				3. Date Incorporated or Qualified 01/28/1992	3a. Date of Last Report 06/17/1996
2. Principal Place of	Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3103654	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	,		\$8.75 Additional
2		27		Certificate of Status Desired	Fee Required
City & State		City & Stato		6. Election Campaign Financing	\$5.00 May Bo
3		28		Trust Fund Contribution	Added to Fees
_ Zip	Country	Zip	Cc	8. This corporation has liability for in	itangible tax under s. 199.032.
4	25	29	30		Yes No
9, 1	lame and Address of Cu	irrent Registered Agent		10. Name and Address of New Reg	istered Agent
	ICARDO M. INIA LANE FL 32703		Name Street Add	dress (P.O. Box Number is Not Acceptabl	9)
			City	1	FL 85 Zip Code
 Pursuant to the p office or register agent. I am fami 	provisions of Sections 607 ed agent, or both, in the S liar with, and accept the o	.0502 and 607.1508, Florida St State of Florida. Such change w bligations of, Section 607.0505	tatules, the named col was authorizthe corpora 5, Florida S	rporation submits this statement for the pu ation's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE Signature	e, typod or printed name of registere	ed agent and title if applicable	(NOTE Registral signature reig.	uired whon reinstating)	DATE
12.	OFFICERS	AND DIRECTORS	1:	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE PDS	ST	☐ DELETE			Change Addition
NAME FAL	OH, RICARDO M.		1.7		
STREET ADDRESS 704	VIRGINIA LANE		1. ADDRESS		
CITY-ST-ZIP APC	PKA FL 32703		1.T - 7IP		
TITLE		☐ DEL€1E		· · · · · · · · · · · · · · · · · · ·	Change Addition
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NAME Street address			2 ADDRESS		
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NAME Street adoress City-St-Zip		DELETE	2S1- ZIP		Change Addition
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